State of Alabama

CHARITABLE ORGANIZATION REGISTRATION STATEMENT Annual Renewal

RETURN TO:

Office of the Attorney General Consumer Affairs Section 11 South Union Street Montgomery, Alabama 36130 (334) 242-7335

This form is for the annual renewal of charitable organizations. If any of the information filed with your organization's Initial Registration has changed, please fill out the original Registration Statement Form and check "update." Please provide the information below.

1.	Legal Name of Charitable Organization	

2. Attach Annual Written Report.

The charitable organization must within ninety (90) days of the close of its fiscal year ending after the date on which it files its initial registration, file an annual written report, which shall include a financial statement covering the fiscal year, clearly setting forth the gross income, expenses, and net income inuring to the benefit of the charitable organization, a balance sheet as of the close of the fiscal year, and a schedule of the activities carried on by the charitable organization in the performance of its purposes and the amounts expended thereon during the fiscal year.

An organization may also meet this requirement by submitting a copy of the Form 990 submitted to the Internal Revenue Service as required by federal law.

A fee of twenty-five dollars (\$25) payable to the Office of the Attorney General must be paid at the time of annual renewal.

Public Disclosure Notice

Information in this statement is public record and all or portions of this information may appear on the Attorney General's website.

THANK YOU FOR YOUR COOPERATION

CERTIFICATION President or Other Authorized Officer _____, (TITLE) _____ I, (NAME) certify under penalty of perjury, that the information contained in this statement is true and correct. I further certify that I am authorized to submit this statement on behalf of the company named in line 1 above. I also understand that I am under a continuing obligation to notify the Office of the Attorney General within ten (10) days of any change in the information provided. SIGNATURE _____ DATE ____ Subscribed and sworn before me this _____ day of ______ , 200____ NOTARY PUBLIC _____ My Commission Expires _____ **Chief Fiscal Officer** _____, (TITLE) ______ hereby I, (NAME) certify under penalty of perjury, that the information contained in this statement is true and correct. I further certify that I am authorized to submit this statement on behalf of the company named in line 1 above. I also understand that I am under a continuing obligation to notify the Office of the Attorney General within ten (10) days of any change in the information provided.

SIGNATURE _____ DATE ____

NOTARY PUBLIC _____ My Commission Expires _____

Subscribed and sworn before me this _____ day of ______ , 200____